

## MINUTES Rate Structure Work Group Meeting Friday, March 11, 2022 / 10:00AM - 12:00PM Held via: Zoom Webinar

Attendance: Sandy Hunt, BDS Facilitator; Jenn Doig, BDS Facilitator; Christy Roy, BDS Facilitator; Alecia Ortiz, A&M; Drew Smith, A&M; Cynthia Mahar, ED Community Crossroads; Ellen McCahon, ED CSNI; Erin Hall, SD Brain Injury Association; Jackie George, Myers and Stauffer; Julia Kotchevar, Myers and Stauffers; Kara Nickulas, ED of Community Programs Crotched Mountain; Kim Shottes, ED Plus Company; Krista Stephani, Myers and Stauffer; Lesley Anne Beerends, Myers and Stauffer; Larry Linden, Easter Seals; Martin McNamara, Optumas; Matthew Cordaro, ED One Sky Services; Shelley Kelleher, CFO Lakes Region Community Services; Sudip Adhikari, Gateways

Please reference the corresponding slide presentation for the detailed agenda, including topics and themes covered in the meeting and corresponding takeaways and applicable action items.

Topic	Key Takeaways & Action Items
Details on cost reporting structure	<ul> <li>Overview</li> <li>Myers and Stauffer (MSLC) provided more details on what can be expected to see in the cost report with general concepts of the items to be included.</li> <li>Data being collected from fiscal year ending in 2021 (Area Agencies (AAs) end their fiscal year on June 30th, but Direct Service Providers (vendors) may end on December 31th)</li> <li>Group will have the ability to review the cost report and provide feedback to ensure we are adequately capturing the data.</li> <li>There will be trainings, webinars, FAQs, and various resources as needed, to help everybody complete the cost report once rolled out.</li> <li>Work Group Member Questions and Feedback</li> <li>A member noted concern over the variation in the last 2 years because of COVID and asked about the best data to use? Could you look at historical utilization data from 2019 and do a comparison of services and get the best picture</li> </ul>

of what is happening in NH today and what we've seen historically as well?

- MSLC Response: At this point, this is still under discussion. We recognize the large variation in costs and data since 2020 and we are working on a method to account for this appropriately.
- Member asked about legacy budgets and how those may skew the data. Especially if it cost more to provide services than the budget allows.
  - MSLC Response: We want to get an accurate picture of what costs are for the AAs, not what was budgeted for the individuals. We want the report to be uniform and collected in a standardized consolidated format. MSLC will research to benchmark true costs, based on what's going on nationally and regionally. Data will be reviewed globally.
- A member noted the difficulties AAs have with geographical factors driving up costs, and ask that this information will be noted during the research.
- Member noted that there are also increased costs related to turn over and training / supervision of staff, will need to find a way to capture that as well.
- Some suggestions for additional service provisions included:
  - Individuals in crisis:
  - The amount of administrative time service coordinators spend doing request for proposals (RFPs); and
  - Annual service agreements, annual assessments.
    - MSLC noted that some of these costs may be captured in the area of the cost report known as "productivity."
- A member asked about services and how rates be determined across waivers?
  - MSLC Response: This is where the workgroup members input will be so important. Could be the same service and billing code, but under a different waiver,

	what are the nuances M&S need to be aware of in order to evaluate the cost in an adequate manner for rate setting.
	<ul> <li>Member asked if we could pilot the report in maybe 2 AAs and a few providers to see how the data is coming in?</li> </ul>
	<ul> <li>MSLC Response: There is a CMS deadline but if time allows we can do a test run with a few providers before rolling out to the entire provider community.</li> </ul>
	<ul> <li>A concern was expressed over the cost differences for variations across the different AAs.</li> </ul>
	<ul> <li>MSLC asked for Work Group members to consider DSP staff qualifications, staffing to client ratios, supervisory requirements, other costs that are incurred in order to provide the service, nuances in service delivery, etc.</li> </ul>
	<ul> <li>Asked workgroup members for an evaluation only on current service definitions, not those currently under discussion with the Waiver Work Group.</li> </ul>
	<ul> <li>Group discussed how they see telehealth continuing into the future.</li> </ul>
	Work Group Member Questions and Feedback
<ul> <li>Review February Work Group Assignments</li> </ul>	<ul> <li>A member suggested that we develop a career path for DSPs. Start early, begin to look at those in the 16-18 year age group.</li> </ul>
	<ul> <li>There is a DSP sub Work Group that came out of the Waiver Work Group which is beginning to meet.</li> </ul>
	<ul> <li>A member noted there should be a centralized, universally accepted training curriculum and certification that all AAs can accept so that individuals as they move from position to position, the training would only have to be paid for once, instead of each Agency paying for the same training over again.</li> </ul>
	<ul> <li>Maybe there could there be cross- sectional education to provide a wide array of services.</li> </ul>

	<ul> <li>Members noted that there has been a great improvement in the consistency of information from the Department in the last few months.</li> </ul>
Assignment and Next Steps	• Please refer to the corresponding work group PPT for details on assignments (if any) and next steps.